



City of Rockville

Maryland Public Information Act Request Form

PURSUANT TO STATE GOVERNMENT ARTICLE, SECTION 10-614, OF THE ANNOTATED CODE OF MARYLAND, THE UNDERSIGNED REQUESTS A COPY OF ALL PUBLIC RECORDS CONTAINING INFORMATION HEREINAFTER DESCRIBED.

Date: _____ Requester Name: _____

Phone Number: _____ Email: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

I request the following public record(s): _____

Requester's Signature: _____

Please refer to the Maryland Public Information Act Guidelines for information on the timing of a response to your request. A response may include a copy of responsive records or notification that responsive records are available for your review.

The first 40 pages of black and white, single-sided, letter size copies of documents requested are free. A copying fee will be charged for additional copies. Records will be released only upon full payment of required fees. Large requests will require a deposit. A waiver of fees may be requested. Waiver determinations are made on a case-by-case basis.

Questions should be directed to the MPIA Coordinator at the City of Rockville, 111 Maryland Ave., Rockville, MD 20850, 240-314-8139, or by email mpia@rockvillemd.gov or fax at 240-314-8130.